

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE
15 FEB -2 PM 4:44
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Ben Cardin for Senate, Inc.

ADDRESS (number and street)

P.O. Box 21093

Check if different
than previously
reported. (ACC)

Catonsville

MD

21228

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00411587

3. IS THIS
REPORT

NEW
(N)

OR

☒ AMENDED
(A)

MD

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)

Runoff (30R)

Special (30S)

Election on

11 / 06 / 2012

in the
State of

MD

5. Covering Period

10 18

2012

through

11 26

2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Robert Mathias

Signature of Treasurer

Robert Mathias

01 31

2015

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

15020080001